



Docket No. 0737850013

PATENT

DAC
JFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Customer Number: 33401
: :
C. Earl WOOLFORK : Confirmation Number: 3337
: :
Application No.: 10/648,012 : Group Art Unit: 2644
: :
Filed: August 26, 2003 : Examiner: Graham, Andrew
: :
For: WIRELESS DIGITAL AUDIO SYSTEM

PETITION FOR UNINTENTIONALLY DELAYED CLAIM FOR § 120 PRIORITY
UNDER 37 C.F.R. § 1.78(a)(3)

Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant respectfully requests acceptance of the revised priority claim in the above identified application.

U.S. Application No. 10/648,012 (hereinafter '012 application), filed on or about August 26, 2003, was filed as an utility application pursuant to 37 C.F.R. 1.53(b). As evident from the transmittal sheet (Exhibit A) submitted at the time the '012 application was filed, Applicant identified the '012 application as a continuation-in-part for U.S. Application No. 10/027,391 (hereinafter '391 application) filed on December 21, 2001.

However, in the continuation-in-part application dated August 25, 2003, which was the subject of the transmittal sheet, the priority claim provided the incorrect serial no. (Exhibit B) which inadvertently identified the '012 application as a continuation-in-part of serial no. 10/027,739, rather than a continuation-in-part of the '391 application. Accordingly, the '391 application was not correctly identified in the specification as a prior U.S. application with benefit claimed

09/01/2005 TBESHAH1 00000013 501946 10648012
01 FC:1454 1370.00 DA
LAS99 1417278-1.073785.0013

Adjustment date: 11/10/2005 AKELLEY
09/01/2005 HBERHE 00000098 501946 10648012
01 FC:1454 1370.00 CR

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 11/8/05 2 Serial/Patent # 10/648, 012

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/> Filing			\$
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/> Petition		8/31/05	\$ 1370
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$

7 TOTAL AMOUNT OF REFUND

\$1370

8 TO BE REFUNDED BY:

☐ Treasury Check

☒ Credit Deposit A/C #:

9 50--1946

10 REASON:

☐ Overpayment

☒ Duplicate Payment

☐ No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Ed. Tamm

TITLE: Ref. Bk

SIGNATURE: [Signature]

PHONE: 23228

OFFICE: 4700

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: [Signature]

DATE: 11/10/05

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: